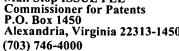
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450





or Fax

NSTRUCTIONS: This for appropriate. All further con indicated unless corrected by maintenance fee notification	below or directed otherwise i	mitting the ISSUE FEE and atent, advance orders and not in Block 1, by (a) specifying	PUBLICATION FEE (if requification of maintenance fees a new correspondence address	uired). Blocks 1 through 4 will be mailed to the curren s; and/or (b) indicating a sep	should be completed where t correspondence address as parate "FEE ADDRESS" for	
	E ADDRESS (Note: Legibly mark-up	with any corrections or use Block 1)	papers. Each addition	f mailing can only be used this certificate cannot be used all paper, such as an assignment of mailing or transmission.	ient or formal drawing, must	
CROWELL & MORING LLP INTELLECTUAL PROPERTY GROUP P.O. BOX 14300 WASHINGTON, DC 20044-4300 WASHINGTON, DC 20044-4300			Constitution I hereby certify that States Postal Service addressed to the Ma	Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.		
	)	2004			(Depositor's name)	
	/	The second second			(Signature)	
		TRADEMARK			(Date)	
APPLICATION NO.	FILING DATE	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
09/865,283	05/29/2001	Herbei	rt Jainek	178/49984	5170	
TILE OF INVENTION: LI	QUID FILTER				·	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330	\$300	\$1630	04/29/2004	
EXAM	INER	ART UNIT	CLASS-SUBCLASS	7		
MENON, KRISHNAN S		1723	210-435000	_		
□ Change of corresponde Address form PTO/SB/12 □ "Fee Address" indicatic PTO/SB/47; Rev 03-02 o Number is required.  ASSIGNEE NAME AND	on (or "Fee Address" Indicati or more recent) attached. Use RESIDENCE DATA TO BE an assignee is identified belo	names of agents O firm (hav agent) an attorneys will be pr	T (print or type)	of a single attorney or tered patent ed, no name  3  Crowe.	11 & Moring LLF	
(A) NAME OF ASSIGNI Filterwer	EE k Mann & Hummel	(B) RESIDEN	Completion of this form is NO CE: (CITY and STATE OR CC wigsburg, German	OUNTRY) ny		
a. The following fee(s) are		4b. Payment of	<del></del>	corporation or other private g	roup entity  government	
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2 Publication Fee		☐ Payment	by credit card. Form PTO-2038	3 is attached.		
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other than the applicant; interest as shown by the red by the collection of information obtain or retain a benefit application. Confidentiality estimated to take 12 minut completed application for case. Any comments on suggestions for reducing the Patent and Trademark (22313-1450. DO NOT S	a registered attorney or age- cords of the United States Pat tion is required by 37 CFR by the public which is to fill it is governed by 35 U.S.C. 12 es to complete, including gal not to the USPTO. Time will	1.311. The information is requested (and by the USPTO to prov. 2 and 37 CFR 1.14. This collethering, preparing, and submit vary depending upon the integration of the Chief Information Offic f Commerce, Alexandria, VED FORMS TO THIS ADI	anyone party in uired to cess) an ection is ting the dividual	4	9865283 1330.00 OP 300.00 OP 15.00 OP	

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